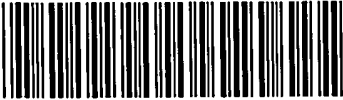


|  |                     |                  |  |
|--|---------------------|------------------|--|
| <b>Issue Classification</b><br> | Application No.     | Applicant(s)     |  |
|  | 09/822,454          | BIRRU, DAGNACHEW |  |
|  | Examiner            | Art Unit         |  |
|  | Lawrence B Williams | 2634             |  |

| ISSUE CLASSIFICATION         |          |   |   |       |                    |                                   |  |  |  |
|------------------------------|----------|---|---|-------|--------------------|-----------------------------------|--|--|--|
| ORIGINAL                     |          |   |   |       | CROSS REFERENCE(S) |                                   |  |  |  |
| CLASS                        | SUBCLASS |   |   |       | CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |  |  |  |
| 375                          | 233      |   |   |       | 375                | 350                               |  |  |  |
| INTERNATIONAL CLASSIFICATION |          |   |   |       | 708                | 323                               |  |  |  |
| H                            | 0        | 3 | K | 5/159 |                    |                                   |  |  |  |
| H                            | 0        | 4 | B | 1/10  |                    |                                   |  |  |  |
| G                            | 0        | 6 | F | 17/10 |                    |                                   |  |  |  |
|                              |          |   |   | /     |                    |                                   |  |  |  |
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|   |                                     |  |
|---|-------------------------------------|--|
| <i>Lawrence B Williams</i> 10/15/04<br>Lawrence B. Williams 09/22/04<br>(Assistant Examiner) (Date) | <i>Amanda</i><br>(Primary Examiner) | Total Claims Allowed: 14<br><br>O.G. Print Claim(s) 1<br>O.G. Print Flg. 4 |
| <i>L. Marks</i> 10-2/04<br>(Legal Instruments Examiner) (Date)                                      | 10.14.04<br>(Date)                  |  |

| <input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant |          |       |          |       | <input type="checkbox"/> CPA |       | <input type="checkbox"/> T.D. |       | <input type="checkbox"/> R.1.47 |       |          |
|---|----------|-------|----------|-------|------------------------------|-------|-------------------------------|-------|---------------------------------|-------|----------|
| Final   | Original | Final | Original | Final | Original                     | Final | Original                      | Final | Original                        | Final | Original |
|   | 1        |       | 31       |       | 61                           |       | 91                            |       | 121                             |       | 151      |
|   | 2        |       | 32       |       | 62                           |       | 92                            |       | 122                             |       | 152      |
|   | 3        |       | 33       |       | 63                           |       | 93                            |       | 123                             |       | 153      |
|   | 4        |       | 34       |       | 64                           |       | 94                            |       | 124                             |       | 154      |
|   | 5        |       | 35       |       | 65                           |       | 95                            |       | 125                             |       | 155      |
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